

**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**

Commissioner for Patents  
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**FAX (703)746-4000**



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7590 05/14/2002

King and Schickli, PLLC  
247 North Broadway  
Lexington, KY 40507

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

\*Change in Correspondence address was submitted 6/4/02. A copy is attached.

Richard C. Stevens	(Depositor's name)
<i>Richard C. Stevens</i>	(Signature)
8/6/02	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/855,333	05/15/2001	John Ivan Kooper	CRN 298 PA	1094

TITLE OF INVENTION: COAST CONTROL FOR WALKIE/RIDER PALLET TRUCK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1280	\$300	\$1580	08/14/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
HURLEY, KEVIN	3611	180-019200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Stevens & Showalter LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Crown Equipment Corporation

New Bremen Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent)  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

(Date)

*Richard C. Stevens* 8/6/02  
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06/14/2002 MDANTE2 00000028 09855333

01 FC:142 1280.00 OP  
02 FC:195 300.00 OP

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